

**Application Data Sheet**  
**Application Information**

**Application number::**

**Filing Date::**

HEREWITH

**Application Type::**

UTILITY

**Subject Matter::**

**Suggested classification::**

**Suggested Group Art Unit::**

**CD-ROM or CD-R?::**

**Number of CD disks::**

**Number of copies of CDs::**

**Sequence submission?::**

**Computer Readable Form (CRF)?::**

**Number of copies of CFR::**

**Title::**

SYSTEMS AND METHODS EXTENDING AN  
EXISTING PROGRAMMING LANGUAGE  
WITH CONSTRUCTS

**Attorney Docket Number::**

BEAS-01389US2

**Request for Early Publication?::**

**Request for Non-Publication?::**

**Suggested Drawing Figure::**

1

**Total Drawing Sheets::**

3

**Small Entity?::**

**Latin name::**

**Variety denomination name::**

**Petition included?::**

**Petition Type::**

**Licensed US Govt. Agency::**

**Contract or Grant Numbers::**

**Secrecy Order in Parent Appl.?::**

## **Applicant Information**

**Applicant Authority Type::**

Utility

**Primary Citizenship Country::**

Hungary

**Status::**

**Given Name::**

Pal

**Middle Name::**

**Family Name::**

Takacsi-Nagy

**Name Suffix::**

Mr.

**City of Residence::**

Cupertino

**State or Province of Residence::**

CA

**Country of Residence::**

US

**Street of mailing address::**

10553 Farallone Drive

**City of mailing address::**

Cupertino

**State or Province of mailing address::**

CA

**Country of mailing address::**

US

**Postal or Zip Code of mailing address::**

95014

## **Correspondence Information**

**Correspondence Customer Number::**

23910

**Phone number::**

(415) 362-3800

**Fax Number::**

(415) 362-2928

**Email address::**

SRM@fdml.com

## Representative Information

**Representative Customer Number::** 23910

## Domestic Priority Information

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
	is an application claiming benefit under 35 UCS 119(e) of	60/450,074	February 25, 2003

## Foreign Priority Information

<b>Country::</b>	<b>Application Number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>

## Assignee Information

**Assignee Name::** BEA Systems, Inc.  
**Street of mailing address::** 2315 North First Street  
**City of mailing address::** San Jose  
**State or Province of mailing address::** CA  
**Country of mailing address::** US  
**Postal or Zip Code of mailing address::** 95131